

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

UNITED STATES OF AMERICA, )

Plaintiff, )

v. )

FUNDS IN THE AMOUNT OF )

FORTY-TWO THOUSAND DOLLARS )

(\$42,000.00); and )

FUNDS IN THE AMOUNT OF )

ONE HUNDRED THIRTY-EIGHT )

THOUSAND, FIVE HUNDRED AND )

FORTY DOLLARS )

(\$138,540), )

Defendants. )

Civil No. 07 C 7147

**CERTIFICATE OF SERVICE**

I, Kela Ellis, a non-attorney, certify that pursuant to Supp. R. For Adm. M. and Forf. Claims G(4), I sent a Notice of Judicial Forfeiture Proceeding, a copy of the Complaint In Rem, and a copy of the Warrant to be served upon:

Artur Vardapetyan and Sirarpi Davitian

[REDACTED]  
[REDACTED]

via certified (12/26/07) and regular mail (1/11/08)

Grayr Demirtchyan

[REDACTED]  
[REDACTED]

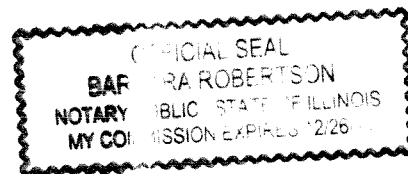
via certified mail (12/26/07)

by enclosing said property addressed envelope, postage paid, and depositing same in the United States mail at 219 S. Dearborn, Chicago, Illinois before the hour of 5:00 p.m. on the 26<sup>th</sup> day of December, 2007 and the 11<sup>th</sup> day of January, 2008.

Kela Ellis  
KELA ELLIS

SUBSCRIBED and SWORN to before me  
this 16<sup>th</sup> day of January 2008.

Barbara Robertson  
NOTARY PUBLIC



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## Track & Confirm

### Search Results

Label/Receipt Number: 7007 0710 0002 1569 [REDACTED]

Status: **Delivered**Your item was delivered at 1:40 PM on December 29, 2007 in [REDACTED]  
[REDACTED][Additional Details >](#)[Return to USPS.com Home >](#)

### Track & Confirm

Enter Label/Receipt Number.

### Notification Options

#### Track & Confirm by email

Get current event information or updates for your item sent to you or others by email.

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[No FEAR Act EEO Data](#)[FOIA](#)

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Grayr Demirtchyan

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service it

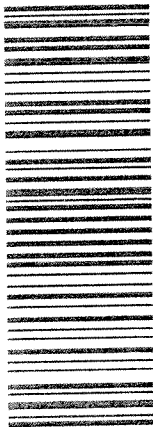
7007 0710 0002 1569

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)



7007 0710 0002 1569  
7007 0710 0002 1569

Postage

\$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees

\$

Postmark  
Here

Grayr Demirtchyan

Sent to

Street Apt. 7  
or PO Box N  
City, State, Z

PS Form 3811

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Artur Vardapetyan

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 0710 0002 1569

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees \$

Postmark  
Here

Artur Vardapetyan

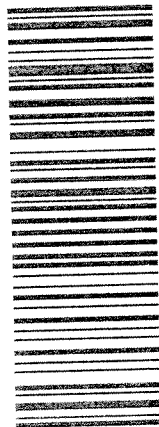
Sent To

Street, Apt. No.  
or PO Box No.

City, State, ZIP

PS Form 3800

7007 0710 0002 1569  
7007 0710 0002 1569

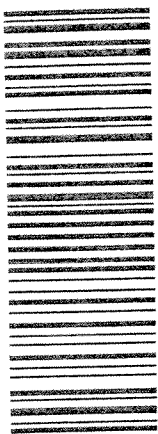


**CERTIFIED MAIL™**

PLACE STICKER ON BACK OF MAILPIECE TO DESIGNATE AS CERTIFIED MAIL. DO NOT WRITE ON THIS LABEL.

## CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)
 7007 0710 0002 1569  
 7007 0710 0002 1569

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here

Sent To Sirarpi Davitian

Street, Ap  
or PO Box  
City, State

PS Form

hons

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sirarpi Davitian

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes
 2. Article Number  
 (Transfer from service label)

7007 0710 0002 1569

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540